



CITY OF GALENA PARK

OPEN RECORDS REQUEST

Takes 1-10 days to return

VIEWING_____

COPIES_____

Today's Date: _____

Requestor's Name: _____

Requestor's Address: _____

Requestor's Phone # where they can be reached: _____

Case Number: _____

Brief Description of Records Requested: _____

Location of Incident: _____

This request is to be left with the City Secretary's Office. Copies and/or viewing of public records will be scheduled by the City Secretary. Prices for the copies vary depending on the number of pages and the research involved, including labor for research.

CITY USE ONLY

Received by: _____

Date: _____

Report Picked Up By: _____

Date: _____